EXHIBIT 10-A

TSEP PROJECT MONITORING CHECKLISTS

PROJECT SUMMARY INFORMATION

TSEP Recipient:[]
Contract #MT-TSEP-[]
TSEP Amount: [\$]
Type of Project: [] Solid Waste Disposal or Separation System [] Storm Sewer [] Wastewater Treatment/Sanitary Sewer [] Bridge [] Drinking Water
Local Project Manager & Phone #: []
Date(s) Monitored: [1 Monitored By: [1

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PART I. IN-OFFICE REVIEW CHECKLISTS A. PROJECT START UP 1. Project Start Requirements: Date: Legislative authorization h. Contract executed Official signature form completed C. d. Official depository form completed Project management plan approved e. f. Implementation schedule approved g. DOC Notice to Proceed issued h. All non-TSEP resources to be involved in the project firmly committed i. All other contract terms and conditions fulfilled 2. Project Management Plan Contents (See Exhibit 1-B, TSEP Project Administration Manual) No NA Yes Is description of proposed Overall Administrative Structure (roles of governing body, a. TSEP recipient's attorney, and key persons to be involved in administration) adequate? Comment: [] Is description of proposed Project Management (persons responsible for day to day b. management and compliance with state laws and regulations) adequate? Comment: [] C. Is description of proposed Financial Management adequate (persons responsible and procedures to be followed for assuring proper expenditure of TSEP and other funds)? Comment: []

B. PROCUREMENT

1.	RFP Review Checklist	(In-office review for professional or other services to be compensate
		in part with TSEP funds

TSEP Project Name: []
Service to be Procured:	

			hitecture [] gineering [] ner []
after a	and En	iter. R	formation on additional contracts: Go to end of Section B, Select Table, Insert, 15 rows, leturn to this row and block to end of printed material in Section B, choose Copy, ty row and select Paste.
Yes	No	NA	
			a. Did the RFP include:
			(1) The name of the local government issuing the RFP? Comment: []
			(2) A brief description of the project including location, purpose, time frame and status? Comment: []
			(3) A brief description of the scope of the services to be provided by the consultant? Comment: []
			(4) The amount budgeted for the proposed scope of services: Comment: []
			(5) The method of payment to be used? Comment: []
			(6) The timeframe for performing the work, including any major milestones or deadlines involved? Comment: []
			(7) Did the RFP evaluation criteria include, at a minimum, the criteria required by 18-8-204 MCA (or their equivalent)? (i) the qualifications of professional personnel to be assigned to the project; (ii) capability to meet time and project budget requirements; (iii) location; (iv) present and projected workloads; (v) related experience on similar projects; and (vi) recent and current work for the agency. Comment: []
			(8) The name and telephone number of a local person who can be contacted for further information regarding the RFP? Comment: []
			(9) Directions for submitting a response to the RFP? Comment: []
			recipient has not incorporated these DOC recommendations in its RFP, the reviewer should ar issues involved with the TSEP project manager before the RFP is advertised.
			(10) Is payment to be on the basis of either a fixed-price or a cost reimbursement type contract? Comment: []

the basis of either a fixed-price or a cost-reimbursement type contract. C. CIVIL RIGHTS NA Yes No Has the Montana Human Rights Commission notified DOC of any complaints of discrimination associated with TSEP-funded activities, for which corrective action is required to overcome the effects? If yes, describe situation: Comment: [] D. AUDIT REVIEW This Checklist Is to Be Completed for Each Audit Covering TSEP Funds Expended During the Term of the Project. Note: to insert information on additional audits: Go to end of Section D, Select Table, Insert, 37 rows, after and Enter. Return to row 1. and block to end of printed material in Section D, choose Copy, return to first empty row and select Paste. 1. Date Audit Received. 2. Date Audit Officially Released. 3. By whom conducted. 4. Fiscal Year TSEP Recipient's Funding Was Awarded. 5. Total funds awarded for project. FY \$ Amount List the state fiscal years in which TSEP funds have been expended and the total amount drawn down by the TSEP recipient for each fiscal year, according to DOC/ SBAS records: Total: \$ List the total amount of TSEP funds received by the TSEP recipient, according to the audit reviewed: Total: \$ List the fiscal years covered by the audit:

Note: Cost plus a percentage of cost and percentage of construction cost are prohibited. Payment must be on

Yes	No	NA		
			9.	Are there any discrepancies between DOC/SBAS financial records and the TSEP recipient's for amounts of TSEP funds drawn down and received by the TSEP recipient which would necessitate any adjustment of records by either DOC or the TSEP recipient? Comment: []
				If so, have such adjustments occurred? Comment: []
				Documentation attached? Comment: []
			10.	Was the audit received by TSEP staff no later than one year after the end of the audited period? Comment: []
			11.	Were there any findings or concerns expressed in the audit report regarding the expenditures of TSEP funds or any compliance issues identified? Comment: []
			12.	If "yes", prepare written inquiry to the appropriate local official requesting a written response to the specific TSEP related findings or concerns expressed by the auditor.
				Letter included in file? Comment: []
			13.	Date DOC/LGS received TSEP recipient's written response to findings. Comment: []
			14.	Copy of TSEP recipient's letter of response or corrective action plan included in file?
			15.	Prepare reply to TSEP recipient's response to audit findings and concerns. Comment: [] Date reply sent: []
			16.	If there were audit findings or instances of noncompliance with applicable laws and regulations, were all corrective actions taken within six months of the receipt of the audit report by TSEP staff? Comment: []
			17.	In the case where TSEP funds are expended by a subrecipient organization, is there evidence that the TSEP grant recipient has received and reviewed an audit(s) of relevant financial expenditures of the subrecipient organization for the effected years? Comment: []
			18.	Were there any illegal acts or irregularities identified by the auditor? Comment: []
			19.	If "yes", have proper local and state officials been informed? Comment: [] Is correspondence included in file? Comment: []

			20.	If a monetary sanction is required, arrange for the establishment of an account receivable by the DOC Management Services Division.
				Account receivable established? Comment: []
			21.	Based on the audit report, is there a need for additional monitoring or technical assistance? Comment: []
\$		22.	Total amount budgeted for audits of TSEP project.	
			23.	Does the TSEP budget for audit costs appear reasonable? Comment: []
			24.	Have audits been received covering all TSEP funds expended for this project? Comment: []
E. P	ROJE	CT CI	LOSE	EOUT
1	I. Con	tract I	nforn	nation
			a.	Date contract was effective.
			b.	Original scheduled completion date.
			c.	Extended scheduled completion date.
2. Financial			Statu	s
			a.	Date of first drawdown of funds.
			b.	Date of last drawdown prior to final closeout.
\$			C.	Total grant amount in contract budget.
\$	T	T	d.	Total actual expenditures at time of closeout.
Yes	No	NA		
			e.	Compare the Status of Funds Report to the last drawdown, SBAS, contract budget and determine whether the budget amounts and actual expenditures are consistent. Are there any discrepancies? (If yes, explain.) Comment: []
			f.	Are there any unobligated (unexpended) TSEP funds remaining with the TSEP recipient? If so, amount: \$[] Comment: []
			g.	Are there any TSEP funds not authorized for expenditure that need to be returned to DOC? If so, amount: \$[] Comment: []
\$			h.	Amount of remaining TSEP funds available for reallocation.
3. Audit Status				

FY	\$ Amount		List the fiscal years in which TSEP funds have been expended and the total amount expended in each.
\$			Total
FY	Date Relea	ased	b. List the fiscal years covered by an audit and Auditor. Audited by: [] Audited by: [] Audited by: []
Yes	No	NA	
			 Does the DOC project file contain copies of all audits covering TSEP funds expended by this project? (Obtain any copies needed from DOC Local Government Services Bureau.) Comment: []
			d. Are there any unresolved findings or noncompliance with applicable laws and regulations issues remaining from the last audit? If "yes", final closeout approval cannot be given until all previous TSEP audit findings are resolved Comment: [].
			e. Have all expended TSEP funds been audited? Comment: []
\$			f. If not, what amount of TSEP funds were expended that were not covered by the audit? Comment: []
			g. Based on the audit information above, determine whether this project requires: (1) Conditional Closeout
			ost recent audit report and summarize financial status information in conditional closeout ny funds to be recovered or reallocated.
4	. Moi	nitorin	g
Yes	No	NA	

			a. Has the project been monitored? Comment: []							
	b. Have all monitoring issues been satisfactorily resolved? If not, resolve issues bef proceeding. Comment: []									
Note:	Refere	ence m	onitoring status in the closeout letter.							
5	. Pro	ject C	ompletion Report							
			 Date project completion report due. (The report is due within 90 days of completion of project activities based on project progress reports and contract completion date. If the report is not received by this date, the TSEP Administrative Officer must follow up and request the report from the TSEP recipient.) 							
			b. Date project completion report submitted.							
Yes	No	NA								
			 Follow the directions in Exhibit 11-A of Chapter 11, Project Closeout, for the completion of the Project Completion Report and complete the following outline checklist to determine whether the report submitted is accurate and complete. Status of funds report accurate and appropriate certifications completed (Exhibit 11-C)? Comment: [] 							
		Exhibit 11-B completed (proposed and actual accomplishments)? Comment: []								
			d. Final audit requirement determined? Comment: []							
			e. Additional information attached:							
			 (1) For economic development projects, documentation of actual accomplishments in comparison to projected hiring goals? Comment: [] 							
			 Open items requiring action including labor standards compliance issues, unpaid costs, or third party claims? Comment: [] 							
			(3) Project engineer's final inspection report or letter? Comment: []							
			(4) Citizen's comments/complaints? Comment: []							
			(5) Comments or suggestions requiring response? Comment: []							

			f.	Project Completion Report complete? If the report is not complete, send a letter to the TSEP recipient contact listing the deficiencies and actions required to complete the report.
				Date letter sent: [] Date response received:[] Was response adequate? []
				Comment: []
			g.	Did the project substantially achieve the accomplishments proposed in the TSEP application and/or the contract? Comment: []
			h.	Based on the review of the file, monitoring report(s), audit report(s), and the Project Completion Report, did the TSEP recipient substantially comply with the laws and regulations associated with the TSEP program? If not, comment on what actions will be taken, if any. Comment: []
			i.	Project Completion Report approved? Comment: []
Note:	Refere	ence P	roject	Completion Report in closeout letter.
e	S. Clo	seout	Lette	er
				r(s) can be organized consistent with this checklist and reference the key items of ing the preparation of the checklist.
Yes	No	NA		
			a.	Was the grant recipient informed in the closeout letter of the requirement that all TSEP-related records must be retained for three years after final project closeout? Comment: []
			b.	Date(s) letter(s) giving closeout approval sent:
				Conditional. []
				Final. []
			C.	Has the TSEP closeout tracking sheet been updated for this project? Comment: []
			d.	If SBAS reports are no longer needed for this project, will DOC/Management Services Division be notified that this project has been closed out? Comment: []
	•	•	•	

TSEP Recipient: []			
Date(s) Monitored: []	Monitored By: []
Persons Interviewed:	ſ	1	

PART II ON-SITE MONITORING CHECKLISTS

A. P	A. PROJECT MANAGEMENT						
1	. Docu	mentati	on				
Yes	No	NA					
			 a. Do the TSEP recipient's files contain a copy of the original TSEP application and all relevant supporting documents? (Map of project area, documentation of local matching funds, etc.) Comment [] 				
2	2. Elig	ible Ac	tivities				
			 Are project activities being carried out in the same manner as proposed in the original TSEP application or as subsequently approved by DOC? (If not, explain how they are different and whether this affects their eligibility.) Comment [] 				
			 Are the project activities being carried out in the same geographic area as proposed in the original TSEP application or as subsequently approved by DOC? (If not, explain circumstances.) Comment [] 				
			c. Were all changes in budget expenditures and project activities approved by DOC in advance? Comment []				
;	3. Man	ageme	nt				
			Does the TSEP recipient's record keeping system contain files for the topics suggested by DOC? Comment []				
			Does the record keeping system appear adequate? Comment []				
			b. Do the TSEP recipient's files contain a copy of the TSEP contract and all subsequent amendments? Comment []				
			c. Does the TSEP recipient have a copy of the approved project management plan and project implementation schedule on file and is it current and up-to-date?				

Comment []
d. Has the TSEP recipient assigned responsibility for the administration of the program to:
An employee? Name and Title: []
A separate agency or consultant? Name: []
Comment []
e. Does the project manager have a copy of the applicable edition of the Montana TSEP Project Administration Manual? Comment []
f. Is there a written agreement with any subrecipient of TSEP funds and/or a memorandum of agreement (or interlocal agreement) with any entity with responsibility for project activities? Comment []
(1) Was the agreement or memorandum approved in advance by DOC? Comment []
(2) Is the subrecipient's or entity's performance in compliance with the agreement or memorandum? Comment []
g. Has the project manager established a tracking system to monitor the completion of project activities against the implementation schedule and budget?
If so, is the system being used effectively?
Comment []
h. Based upon the on-site monitoring, does the level of project implementation appear consistent with project progress reports? Comment []
 i. Based upon the on-site monitoring, does it appear that the project will be completed in conformance with the implementation schedule in the TSEP contract? (If not, please explain how situation will be resolved.) Comment []
j. Review TSEP recipient's Citizen Participation File for any public comment, inquiries, or complaints regarding the project. Were any problems identified or complaints received?
If "yes", did they receive responses within a reasonable time period (approximately 15 calendar days)?
Were the problems or complaints resolved promptly and satisfactorily?

			Comment []				
B. E	NVIRC	NMEN	IT				
			Have any environmentally related complaints been received as a result of project activities? Comment []				
			Does on-site monitoring of the project area reveal the existence of any environmental concerns that may require mitigating measures during project implementation? Comment []				
			Does on-site monitoring of the project indicate any noncompliance with state environmental laws or regulations? Comment []				
C. PI	ROCU	REME	NT				
1	l. Pro	curem	ent Review Checklists				
i G I	(Note: These checklists are intended for on-site review of TSEP recipients' records regarding procurement of any goods or services to be funded in whole or in part with TSEP funds. Copy checklist and complete for each procurement and contract reviewed, including TSEP-funded professional services contracts such as grant management, architectural, or engineering services. Checklist may be used either for in-office or on-site reviews of procurement procedures. (For construction contracts, see part H, Public Facility Construction Management.)						
Name of Firm/Contractor: [] Purpose of Contract: [] Date of Contract: [] Amount: [] Procurement Type: [] Note: To insert information on additional contracts: Go to end of Section C, Select Table, Insert, 30 rows, After and Enter. Return to this row and block to end of printed material in Section C. Copy, return to first empty row and select Paste. This must be done for each additional contract.							
	a.	Small	Purchase				
			(1) Was the small purchase procedure appropriate for the goods or service being procured? Comment []				
			(2) Were price quotes obtained from more than one qualified source and do				

	they appear reasonable? Comment []
b. Competitiv	ve Proposals (Selection by RFP)
(1)	Is a competitive proposal procedure appropriate for the goods or service being procured? Comment []
(2)	Were proposals requested from an adequate number of qualified sources (at least two)? Comment []
(3)	Did the TSEP recipient adequately publicize the RFP and honor reasonable requests to submit responses to the RFP? Comment []
(4)	Were all the responses evaluated according to the written criteria established in advance? Comment []
(5)	Did the grant recipient have a method for conducting technical valuations of the proposals received and for selecting the awardee? Comment []
(6)	Did the grant recipient check references for the awardee? Comment []
c. Noncompe	titive Negotiation (Sole Source)
(1)	After solicitation from a number of sources, was competition determined to be adequate? Comment []
(2)	Were the items or services required available only from one source? Comment []
(3)	Did a public emergency exist such that the urgency would not permit a delay to use one of the other methods of procurement? Comment []
(4)	Did TSEP staff authorize sole source procurement? Comment []
d. General Qu	uestions for any type of Procurement
(1)	Did the TSEP recipient's procurement files contain adequate written

			documentation of the procurement and the procedures followed for the sampled procurement transaction? Comment []
		(2)	Did the solicitation incorporate a clear and accurate description of the technical requirements for the material, product, or service to be procured? Comment []
		(3)	Was the procurement transaction conducted in a manner that provided maximum open and free competition? (The procedures and description of technical requirements did not unduly restrict or eliminate competition.) Comment []
		(4)	Were the methods used to advertise or solicit competition appropriate and in compliance with Montana law? Comment []
		(5)	Did the TSEP recipient submit the contract for DOC review, prior to entering into the contract? Comment []
		(6)	Does the contract contain the applicable TSEP clauses required by DOC? (See checklist in Exhibit 3-H in TSEP Project Administration Manual.) Comment []
	•		mat for a Professional Services Contract", Exhibit 3-F in TSEP Project for text of the required clauses for professional services agreements.)
		(7)	Was the contract reviewed previously by DOC? If not, complete the checklist shown in Exhibit 3-H, TSEP Project Administration Manual. The clauses noted with an asterisk are required by DOC.
		(8)	Were all required contract clauses or their equivalent included? Comment []
		(9)	Which method of compensation was used:
			Firm fixed-price [] Cost-reimbursable []
			Note: Cost plus a percentage of cost and percentage of construction cost are prohibited. Payment must be on the basis of either a fixed-price or a cost-reimbursement type contract.
		(10)	Have any apparent conflicts of interest occurred in any procurement assisted with TSEP funds or does a potential exist for violation of Sections 2-2-201 or 7-5-4109, MCA?

				Comment []
			(11)	Has the TSEP recipient utilized the conflict of interest waiver provisions set out in Sections 2-2-201 or 7-5-4109, MCA for any procurement assisted with TSEP funds? If yes, describe the situation. Comment []
			(12)	Has the TSEP recipient established procedures to assure ongoing review of consultant or contractor performance and contract expenditures during the term of all TSEP-funded contracts? Comment []
D. FIN	NANCI	AL MA	NAG	EMENT
1	I. Gen	eral Is	sues	
			a.	Has the TSEP recipient received assistance from the DOC Local Government Services (LGS) Bureau in establishing a financial management and recordkeeping system to account for all TSEP money?
				Date of visit(s) []
				Comment []
			b.	Did the LGS Bureau identify any concerns regarding the TSEP recipient's financial management system? If yes, describe. Comment []
				Have these concerns been satisfactorily addressed by the TSEP recipient? Comment []
			C.	Has any entity-wide audit or DOC monitoring been conducted to date during the term of the TSEP project?
				If yes, date of monitoring or date of audit: []
				Name of firm or agency which conducted the audit: []
				Comment []
			d.	If so, are any findings in that audit or DOC monitoring pertinent to the financial management of TSEP funds? Comment []
			e.	If yes, has the TSEP recipient satisfactorily resolved all findings noted in DOC monitoring letters or any previous audits conducted during the term of

		the project? Comment []
	f.	Are the TSEP funds within the direct control of the city, town, or county, and included in their financial statements? Comment []
	g.	What financial system does the TSEP recipient use:
		BARS [] TAS [] Other [] (If Other, describe)
		Comment []
	h.	Has the TSEP recipient adopted a budget for expenditure of the TSEP funds by resolution and in accordance with the TSEP contract? Comment []
	i.	Are the budget line items recorded by the TSEP recipient consistent with the budget line items in the TSEP contract? Comment []
	j.	Has the TSEP recipient established a separate special revenue fund for TSEP funds (unless the TSEP funds were a contribution to the enterprise fund)? Comment []
	k.	Are the TSEP funds receipted for in the same manner as other revenue? Comment []
	l.	Are TSEP funds deposited into: (1) the TSEP recipient's central accounting system [] or
		(2) a separate account for TSEP funds []
		Comment []
	m.	Are TSEP expenditures processed in the same manner as other non-TSEP recipient expenditures? Comment []
	n.	Which individuals validate/authorize claims for payment (such as Department Head)? []
	0.	Does someone compare proposed expenditures against budgeted line items and TSEP-financed contracts in order to prevent overspending on the authorized budget?

	Comment []
	p. Which individuals prepare warrants? [] Comment []
	 q. Does there appear to be sufficient separation of duties to ensure adequate internal control? Comment []
	r. Are the public officials and employees involved in managing TSEP funds bonded as required by Montana law (2-9-701 and 2-9-801, MCA)? Comment []
2. Expe	enditure Review
\$ \$ \$ \$	a. Total amount of funds drawn to date. through Draw #[] Total amount of funds expended (per TSEP recipient's records) Balance Amount of cash on hand. Comment []
	 b. Do the DOC/SBAS financial records and the TSEP recipient's records for the amount of TSEP funds drawn down and received agree? If "no", which records need to be corrected? Comment [] Note: Using Project Expenditure Sampling Form following, sample a reasonable number of TSEP-funded expenditures from administration and activity budget categories. For administration, in particular, review payroll timesheets, telephone bills, and travel expenses to assure reasonable relationship to TSEP activities.



ADMINISTRATION

Claim No.	Date	Vendor/Source No.	Amount	Warrant No.	Approved By	Comments

ACTIVITY

1
 c. Were any ineligible expenditures charged against the TSEP budget for the period prior to the date of the Notice to Proceed (See part A, Project Start Up, for date)? Comment []
 d. Were any ineligible expenditures charged against the grant during the period following DOC's Notice to Proceed? Comment []
e. Does a review of the following TSEP-funded project expenditures verify that they are necessary and reasonable for administration of the project?
(1) Administrative service contracts (e.g., legal, accounting, audit, consulting); Comment []
(2) Salaries and related costs; Comment []
(3) Travel and training expenditures; Comment []
(4) Communications (e.g. telephone, postage); Comment []
(5) Other administrative costs (supplies, printing, equipment)?Comment []
f. Were all sampled claims reviewed and approved by authorized individuals (Department Head, Council, etc.)? Comment []
g. Were all sampled expenditures supported by adequate source documentation (invoices, contracts, purchase orders, etc.)? Comment []
h. Were all sampled TSEP-funded expenditures in accordance with the TSEP budget line items? Comment []
 i. Were all the sampled TSEP-funded expenditures eligible and appropriate uses of TSEP funds? Comment []
j. Were any TSEP-funded administration expenditures for work performed by city or county employees supported by adequate payroll records

				(timesheets)? Comment []
			k.	Are TSEP-funded payroll costs being prorated on a reasonable basis for local staff working partially on TSEP project activities? Comment []
			l.	Were any TSEP-funded activity expenditures for work performed by city or county employees supported by adequate payroll records (timesheets)? Comment []
			m.	Does a review of the payroll forms reveal any instances of personnel being paid from, but not working on, program activities? Comment []
			n.	Were all budget adjustments between line items in excess of \$5,000 approved by DOC? Comment []
E. L	ABOR			
1	I. Deb	arred (Conti	ractor Check
			a.	Did the TSEP recipient contact DOC prior to entering into contracts to determined whether the contractor and subcontractors selected were listed by the Montana Department of Labor and Industry as "debarred contractors"? Comment []
2	2. Stat	e Preva	ailing	g Wages
			a.	Does the contract contain a copy of the correct state prevailing wage decision for the project? Comment []
				Heavy and Highway [] Wage Decision Date(s) [] Building [] Wage Decision Date(s) []
			b.	Are the appropriate wage decisions in use? Comment []
3	3. Payı	roll Re	view	
,			a.	Is Form WH347 (Exhibit 6-F.1), U.S. DOL Payroll Form or its equivalent being used by the Contractor and sub-contractors?

				Comment []
			b.	Are payrolls submitted weekly? Comment []
			C.	Is there evidence of weekly payroll review? If yes, type of evidence (e.g., initialed and dated by reviewer). Comment []
			d.	Are payrolls numbered sequentially? Comment []
			e.	Are payrolls signed by the employer or an authorized representative? Comment []
			f.	If applicable, are apprentice/trainee records on file? Comment []
			g.	Has overtime been paid? Comment []
			h.	Was the appropriate state prevailing wage rate determination posted at the job site and reasonably accessible to employees for their review? Comment []
			i.	Were proper payrolls submitted for all working subcontractors? Comment []
4	l. Emp	loyee	Inter	views
			a.	Is there evidence of employee interviews (completed copies of TSEP interview forms on file)? Comment []
				Sample A Name of individual interviewed [] Contractor: [] Job Classification: [] If applicable, Group: [] Zone [] Actual Wage: [\$] + Fringe [\$] = [] Required Wage: [\$] + Fringe [\$] = [] Was the wage correct: [] Comment []
				Sample B Name of individual interviewed []

Sample C Name of individual interviewed []	
Contractor: [] Job Classification: [] If applicable, Group: [] Zone [] Actual Wage: [\$]+ Fringe [\$] = [] Required Wage: [\$]+ Fringe [\$] = [] Was the wage correct: [] Comment []	
b. Were interviews sufficiently documented? Comment []	
c. Was a representative number of trades covered? Comment []	
d. Are interviews compared against payrolls? Comment []	
e. Are there instances of incorrect wage payments or labor standards violations? If yes, describe. Comment []	
f. Were investigations of noted violations conducted in a timely manner? describe. Comment []	If not,
g. Has restitution been made to the affected workers? Comment []	
h. Were records and documentation sufficient to support the findings and resolution of violations? Comment []	d the
i. If labor requirements problems have occurred, have follow-up procedule been agreed on to correct or improve performance? Comment []	ires

F. PRO	PER	TY AC	QUI	SITION (Complete only for properties acquired with TSEP funds.)		
			Total number of acquisitions proposed: []			
			Number of acquisitions made to date: []			
				General Information. Complete for each acquisition sampled: Name of property owner: [] Telephone Number: [] Address of acquired property: [] Property Use: Single Fam. Res. []; Fam. Res. []; Business []; Nonprofit [] Occupants? [] No [] Tenants? [] No []		
			2.	Were the property acquisitions voluntary? Comment []		
			3.	Does the TSEP recipient have adequate documentation of the acquisition of all real property purchased with TSEP funds? Comment []		
			4.	Does it appear that all property was acquired in compliance with Montana law? Comment []		
			5.	Why were the property acquisitions necessary to complete the project? Comment []		
G. PUBLIC FACILITY CONSTRUCTION MANAGEMENT						
1. Construction Contract Procurement Process						
			a.	Project location (County and nearest town): []		
			b.	Description of work: []		
			C.	Names of newspapers used for bid advertising and dates of publication: [
			d.	Bid opening date: []		
			e.	Were competitive bids obtained through formal advertising for all publicly contracted construction in compliance with 7-5-2301 and 7-5-4302, MCA? Note: Required by Montana law for all construction contracts in excess of \$25,000. Comment []		

			f.	List of Bidders (or attach copy of bid tabulation) [] [\$] [] [\$] [] [\$] [] [\$] [] [\$] [] [\$]		
			g.	Date contract was awarded: []		
			h.	Name of Contractor(s): []		
			i.	Date of Preconstruction Conference: []		
			j.	Is a copy of the conference minutes on file? Comment []		
			k.	Date of Contractor's Notice to Proceed: []		
2	2. Bon	ding	T			
				construction contracts over \$100,000, did the contractor(s) meet the uirements for:		
				(1) Bid bond equal to 10% of bid price? Comment []		
				(2) Performance bond equal to 100% of contract price? Comment []		
				(3) Payment bond equal to 100% of contract price? Comment []		
3	3. Contract Documents					
			a.	Was the contract bid document previously reviewed by DOC to verify that all TSEP Supplemental General Conditions or their equivalent were included? (See Exhibit 6-A, TSEP Project Administration Manual.) Comment []		
			b.	If not, does the contract document contain all TSEP Supplemental General Conditions or their equivalent? If "no", describe how compliance with the applicable requirements will be achieved. Comment []		
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			C.	Was the contract bid document reviewed by DOC to verify that all proposed construction work was appropriate and eligible for TSEP funding? Comment []
			d.	Was firm fixed-price or lump sum compensation used? Comment []
4	l. Cha	nge Or	ders	
			a.	Have any change orders been issued for the Project? Comment []
				If "yes", sample and describe representative change orders:
				Sample Number One Date: [] Amount: [\$] Purpose: [] Contractor [] Who approved the change order? [] Does it appear that the cost and purpose of the change order were reasonable? [] How was the change order funded? [] Sample Number Two Date: [] Amount: [\$] Purpose: [] Contractor [] Who approved the change order? [] Does it appear that the cost and purpose of the change order were reasonable? [] How was the change order funded? [] Sample Number Three Date: []
				Date: [] Amount: [\$] Purpose: [] Contractor [] Who approved the change order? [] Does it appear that the cost and purpose of the change order were reasonable? [] How was the change order funded? []

	 b. Did any of the change orders affect the TSEP project budget, scope of work or construction schedule? Comment []
	c. If yes, did the change order(s) receive prior review and approval? Comment []